

APR 17 2008

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/09/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2008☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,050.00

Complete if Known

Application Number	10/552200
Filing Date	May 06, 2004
First Named Inventor	Allan Blase Joseph Rodrigues, et al.
Examiner Name	Gordon J. Stock Jr.
Art Unit	2877
Attorney Docket No.	FA1159USPCT

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 04-1928 Deposit Account Name: E. I. du Pont de Nemours and Company

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	<input type="checkbox"/> 310	155	<input type="checkbox"/> 510	255	<input type="checkbox"/> 210	105	0.00
Design	<input type="checkbox"/> 210	105	<input type="checkbox"/> 100	50	<input type="checkbox"/> 130	65	0.00
Plant	<input type="checkbox"/> 210	105	<input type="checkbox"/> 310	155	<input type="checkbox"/> 160	80	0.00
Reissue	<input type="checkbox"/> 310	155	<input type="checkbox"/> 510	255	<input type="checkbox"/> 620	310	0.00
Provisional	<input type="checkbox"/> 210	105	<input type="checkbox"/> 0	0	<input type="checkbox"/> 0	0	0.00

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues) _____

Each independent claim over 3 (including Reissues) _____

Multiple dependent claims _____

Fee (\$)	Small Entity Fee (\$)
50	25
210	105
370	185

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

- 20 or HP = _____ x 50.00 = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = _____ x 210.00 = _____

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims

Fee (\$)

YES ☐ 370.00

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets **Number of each additional 50 or fraction thereof** Fee (\$) Fee Paid (\$)

- 100 = _____ / 50 = _____ (round up to a whole number) x 260.00 = 0.00

4. OTHER FEE(S)☐ Non-English Specification, \$130 fee (no small entity discount)☒ Other (e.g., late filing surcharge): 3-Month Extension of Time

1,050.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	40,296	Telephone	(302) 992-4385
Name (Print/Type)	KEVIN S. DOBSON FOR SUDHIR G. DESHMUKH			Date	April 17, 2008

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Extension of Time
Response

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